Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

		. ·		
Applicant Name	San Joe	Zigrossi		
Date Received:	2 0 10	oplicant Number:	10302	
Recommended Applicant Pool Status: Final Applicant Pool Status:				
Recommended	Applicant roof status.			
Included	Removed	☑Included	Removed	
REQUIREMENTS:				
1. Was the application received before the submission deadline?			□Yes □No	
If NO, list t				
2. Is the application complete?			XYes □No	
If NO, list t				
3. Indicate how the applicant responded to the following questions:				
A. Student enrolled in a college/university in the City of Austin?			□Yes ☑No	
If YES, consider I and ii only; If NO, consider I, ii, iii, and iv:				
i. Re	eside in the City of Austin?		✓Yes □No	
ii. Re	egistered to vote in the City of Au	stin?	☐yes ☐No	
iii. Co	ontinuously registered to vote in	the City of Austin?	□Yes □No	
îv. V e	oted in 3 of the last 5 City of Aust	in general elections?	☐Yes ☐No	
Follow-up needed related to REQUIREMENTS? If YES, identify issue(s) addressed and disposition:				

Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
CONFLICTS OF INTEREST: 4. Did the applicant respond "Yes" to any conflict of interest questions? If YES, indicate which question(s):	□Yes ØNo
Follow-up needed related to CONFLICTS OF INTEREST? If YES, identify issue(s) addressed and disposition: - When an austin /TC commission - When an Rep procence there	□Ves □No
CONSISTENCY: 5. Are applicant answers consistent? If NO, indicate which answer(s):	☐yes ☐No
Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition:	□Yes □No
Application Reviewed By: Quality Control Review By: Follow-up Contact(s) Reviewed By: Date:	Date: 2/21/13 ew Date: 2/28/13 2/28/13